## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450



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| 75  | E ADDRESS (Note: Use Block 1 for 90 02/10/2005       | any change of address)               | <i>&gt;</i>  | Note: A certificate Fec(s) Transmittal papers. Each addit have its own certif           | e of mailing can only be used. This certificate cannot be used ional paper, such as an assignicate of mailing or transmission                                   | I for domestic mailings of the<br>ed for any other accompanying<br>ment or formal drawing, must<br>n.                                       |
|---|--|--------------------------------------|--|---|---|---|
| Ronald K Grudzie<br>Burns Doane Sweck<br>PO Box 1404<br>Alexandria, VA 223  | ker & Mathis   | MAY 1 0 20                           | 10 C.  | I hereby certify the<br>States Postal Servi<br>addressed to the<br>transmitted to the U | Certificate of Mailing or Tra<br>at this Fec(s) Transmittal is be<br>ce with sufficient postage for<br>Mail Stop ISSUE FEE addre<br>JSPTO (703) 746-4000, on th | ansmission<br>sing deposited with the United<br>first class mail in an envelope<br>ses above, or being facsimile<br>e date indicated below. |
| 2005 MBEYENE2 000000  |  | TEN.                                 | MET S  |   |   | (Depositor's name)  |
| 1501<br>8001  | 1400.00 OP<br>30.00 OP                               | TRADE                                | N. J.  |   |   | (Signature)   |
| APPLICATION NO.   | FILING DATE  | FIRST NAMED I                        |  | INVENTOR  | ATTORNEY DOCKET NO  | . CONFIRMATION NO.  |
| 09/869,360  | 06/28/2001   | Harukazu F                           |  | Fukami  | 001560-403  | 2680  |
| APPLN. TYPE nonprovisional  | NO   | ISSUE FEE<br>\$1400                  |  | \$0   | TOTAL FEE(S) DUE  | 05/10/2005  |
| nonprovisional  | NO   | \$1400                               |  | \$0   | \$1400  | 05/10/2005  |
| EXAMINER  |  | ART UNIT                             |  | CLASS-SUBCLASS  |   |   |
| RAYMOND, RICHARD L  |  | 1624                                 |  | 514-266300  |   |   |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. |  |                                      | 2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  Burns, Doane, Swecked |   |   |   |
| ASSIGNEE NAME AND   | RESIDENCE DATA TO B                                  | E PRINTED ON T                       | HE PATENT  | (print or type)   |   |   |
| PLEASE NOTE: Unless recordation as set forth in   | an assignee is identified be 37 CFR 3.11. Completion | elow, no assignee of this form is NO | data will appe<br>Γa substitute f  | ar on the patent. If an assort filing an assignment.                                    | signee is identified below, the   | document has been filed for   |
| (A) NAME OF ASSIGNE   | EE   | (B                                   | ) RESIDENC   | E: (CITY and STATE OR   | COUNTRY)  |   |
| Daiichi Sun   | tory Pharma Co                                       | ., Ltdl                              | 7  | okyo, Japan   |   |   |
|   |  | ries (will not be pri                | inted on the pa  | tent): 🔲 Individual 🗵   | KCorporation or other private   | group entity Government   |
| ease check the appropriate  | assignee category or catego                          | ` .                                  |  |   |   |   |
|   |  |                                      | . Payment of I   | ee(s):  |   |   |
| a. The following fee(s) are e   |  | 4b                                   | . Payment of F   |   | s enclosed.   |   |

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Dadio

May 10, 2004

40,373 Registration No.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

Typed or printed name Susan M.

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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5. Change in Entity Status (from status indicated above)







## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

**MAIL STOP ISSUE FEE** 

Harukazu Fukami et al.

Confirmation No.: 2680

Application No.: 09/869,360

Filing Date:

June 28, 2001

Title: BLOOD VESSEL LIPID DEPOSITION-PREVENTIVE AGENT COMPRISING CHYMASE-INHIBITOR

## PAYMENT OF ISSUE FEE AND AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT FOR ANY DEFICIENCY

**Commissioner for Patents** P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Attached is an Issue Fee Transmittal form (form PTOL-85). The Director is hereby authorized to charge any fees under 37 C.F.R. §§ 1.18, 1.19, and 1.21 that may be required by the attached Issue Fee Transmittal Form, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

P.O. Box 1404 Alexandria, Virginia 22313-1404 (703) 836-6620

Date: May 10, 2005

Registration No. 40,373